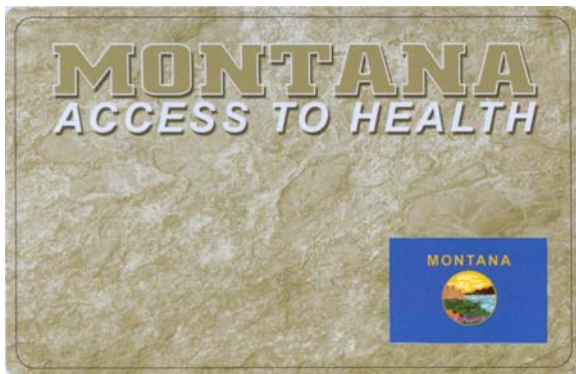


## Medicaid Hard Card FAQ

Note: the term “client” is used throughout this document. The terms “patient”, “recipient”, “participant”, “applicant” or similar appropriate term may be substituted for “client”.



Front



Back

Q1: Why is Montana Medicaid moving to a plastic Hard Card?

A1: Medicaid eligible clients receive a paper Medicaid card in the mail every month. Producing and mailing over 55,000 of these cards each month is expensive. In an effort to contain costs and improve customer service, Montana Medicaid converted to plastic identification cards.

Q2: When is this going to happen?

A2: Short Answer – any client eligible for September benefits will receive a card by 9/1.

- September will be a “dual card” month, where eligible clients receive both a paper card and a *Montana Access to Health* card. **Clients must keep the *Montana Access to Health* card!** It is a permanent card; they should never throw the *Montana Access to Health* card away, even if their Medicaid ends.
- Starting October, newly eligible clients will only receive the Hard Card.

Long Answer - Any client who was eligible for Medicaid in August will receive a Hard Card by September 1 (Cards will be mailed to clients starting on 8/15/03). Any client who was not eligible in August, but became eligible for September benefits will receive a card by 9/1.

- September will be a “dual card” month, where eligible clients receive both a paper card and a *Montana Access to Health* card. **Clients must keep the *Montana Access to Health* card!** It is a permanent card; they should never throw the *Montana Access to Health* card away, even if their Medicaid ends.
- Starting October, newly eligible clients will only receive the Hard Card.

Q3: Who’s going to get a *Montana Access to Health* card?

A3: Every client will receive his or her own card, starting September 1. The *Montana Access to Health* card is individualized – no more ‘family’ cards.

Clients must keep the *Montana Access to Health* card! It is a permanent card; they should never throw the *Montana Access to Health* card away, even if their Medicaid ends.

Every Medicaid sub-type will receive a card. This includes QMB only clients. MHSP only clients will NOT receive a Medicaid Hard Card (note: they already receive a MHSP Hard Card).

Presumptive Eligible pregnant women will NOT receive a *Montana Access to Health* card, until they are determined to be Medicaid eligible.

Q4: What information is on the *Montana Access to Health* card?

A4: The *Montana Access to Health* card is an ID card only.

- The face of the card contains the client's name, the client's date of birth, and a unique ID number. This ID number is used when billing Medicaid and may be the client's Social Security number.
- The back of the card contains a magnetic stripe, as well as important information for both the client and the provider.

Possession of the *Montana Access to Health* card DOES NOT guarantee eligibility or payment for services. Providers are responsible for verifying the identity and eligibility of the cardholder.

Q5: How will we know if a client is eligible?

A5: Since the eligibility information will not appear on the *Montana Access to Health* card, it will be necessary for providers to verify eligibility before providing services. There are a variety of eligibility verification resources for providers to use.

From a query into any of the Eligibility Verification Services listed below, the provider will learn if the client is eligible for Medicaid on the requested date of service; who the client's PASSPORT provider is (if enrolled in Managed Care); if the client has other insurance coverage (TPL); cost share; and other information regarding eligibility.

**AVRS (800) 714-0060** – this eligibility verification resource issues an instant phone message about the client's eligibility. Available 24 hours a day, 7 days a week.

**FAXBACK (800) 714-0075** – this eligibility verification resource sends a FAX to the provider's FAX machine with the client's eligibility listed. Available 24 hours a day, 7 days a week.

**MEPS [vhsp.dphhs.state.mt.us](http://vhsp.dphhs.state.mt.us)** – this eligibility verification resource requires that the provider register before use; issues eligibility verification that can be printed for client's file. Available 24 hours a day, 7 days a week.

**MEDIFAX EDI [www.medifax.com](http://www.medifax.com); (800) 444-4336** – MEDIFAX has a variety of options for eligibility verification, ranging from a point-of-sale terminal to Internet sites listing eligibility. Call Sheri Smith at x2072 for additional information on these services.

Eligibility can also be verified by calling Provider Relations at (800) 624-3958 in state or at (406) 442-1837 out-of-state or in Helena.

Q6: We're a PASSPORT Provider – how will we know if a client is enrolled with us?

A6: You will continue to get your enrollee list mailed to you monthly. If you do not know how to use this list, or have questions about it call the PASSPORT provider help line at 1-800-624-3958 or (406) 442-1837 outside Montana.

Additionally, using by any of the Eligibility Verification Services listed above, the provider will learn if the client is eligible for Medicaid on the requested date of service; who the client's PASSPORT provider is (if enrolled in Managed Care); if the client has other insurance coverage

(TPL); cost share; and other information regarding eligibility.

Starting in October, clients will be notified of any changes to their PASSPORT provider.

Q7: Is it mandatory that we subscribe to Medifax?

A7: No. It is the provider's choice to subscribe to Medifax. Providers will always have several free methods of verifying eligibility.

Q8: What's the cost to subscribe to Medifax?

A8: Medifax offers several different products. Contact Sheri Smith at [sheri.smith@medifax.com](mailto:sheri.smith@medifax.com) or at (800) 444-4336 x2072 for product information.

Q9: What do clients do if they lose their *Montana Access to Health* card?

A9: Clients who have no longer have their *Montana Access to Health* card should contact their local Office of Public Assistance to order a replacement card.

Q10: Why would replacement *Montana Access to Health* cards be issued?

A10: The *Montana Access to Health* card will be replaced if the client reports that the card was lost, stolen, or damaged. Clients can request a replacement *Montana Access to Health* card by contacting their local Office of Public Assistance to order a replacement card.

Clients must keep the *Montana Access to Health* card! It is a permanent card; they should never throw the *Montana Access to Health* card away, even if their Medicaid ends.

Q11: What do we do if a client doesn't have their *Montana Access to Health* card?

A11: This issue exists with the paper Medicaid Card – when clients say they have Medicaid but don't have a card, confirm eligibility using one of the methods listed above. If eligibility is not shown, the provider may contact the client's local Office of Public Assistance.

If a client does not bring in their *Montana Access to Health* card and the provider cannot verify eligibility, the provider may take the client as "private pay". When establishing a client as private pay, the provider must inform the client, **before providing the services**, that he or she is not accepted as a Medicaid client, and that the client agrees to be financially responsible for the services received. It is recommended that this agreement be in writing.

For more information on billing Medicaid clients, see *Billing Procedures* in the specific provider manual.

Q12: Whom should I call if I have more questions?

A12: **Providers** – For questions related to the Medifax, contact Sheri Smith at [sheri.smith@medifax.com](mailto:sheri.smith@medifax.com) or at (800) 444-4336 x2072. For general *Montana Access to Health* card information, contact Darren Steiner at (406) 444-1813 or [dsteiner@state.mt.us](mailto:dsteiner@state.mt.us).

**Clients** – Call your local Office of Public Assistance or the Montana Medicaid Help Line at (800) 362-8312.